

SFMS APPLICATON FOR 2010 MEMBERSHIP RENEWAL

The Southeast Federation of Mineralogical Societies, Inc.

Club/Society Name _____

MEMBERSHIP RENEWAL: Due January 1, 2010 through January 31, 2010

In compliance with SFMS By-laws Article I, Section 2, and Article VIII, Section 1, member clubs/societies desiring to renew membership are required to submit to Membership Secretary the following:

Completed Membership Renewal Application (all 3 pages) with the Annual Dues Check attached (No cash please), based on total members, both Adults & Juniors, on Club/Society rolls as of December 31, 2009.

Annual Dues: Total Number of Adult Members _____

Total Number of Junior Members _____

* Total Dues Enclosed @ \$1.25 per member _____

*** Does not include optional Liability Insurance fees, which will be billed separately.**

Mail (Check for dues only), payable to the Southeast Federation or SFMS along with all 3 pages of the Renewal Application and a current list of your members to the following address:

**Ray Behr
SFMS MEMBERSHIP SECRETARY
PO Box 30
Franklin, NC 28744**

According to SFMS By-laws, Article VIII, Section 1 ---
Membership renewals are due January 1 through January 31, and are delinquent as of February 1. Delinquent clubs/societies forfeit voting rights at the next Annual Meeting, use of Slide Programs, the right to participate in the Federation's sponsored third-party liability insurance program, the rights of their members to participate in DMC field trips, the rights of their members to attend SFMS sponsored workshops, and receipt of Lodestar (the SFMS federation newsletter.) A club/society delinquent membership may be reinstated to full SFMS Membership upon payment of all dues and fees in arrears before March 1, 2010. **Any club/society not paying all dues and fees in arrears before March 1 will be dropped from federation rolls.** They may be readmitted as a new club/society by submission of an Application for Membership.

(This requires being voted in as a new club at the next Executive Board Meeting.)

Non-paid clubs are delinquent on February 1, 2010

SFMS APPLICATION FOR 2010 MEMBERSHIP RENEWAL

PLEASE PRINT LEGIBLY

Name of Club/Society _____

Club Mailing Address _____

City _____ State _____ Zip _____

Meeting Place (facility) _____ Day _____ Time _____

City _____ State _____ Zip _____

Club/Society Web Site _____ Email _____

Bulletin Name _____ Published: Monthly __ Bimonthly __

Editor _____ Quarterly __ Other _____

Phone number _____ Email _____

Street Address _____

City _____ State _____ Zip _____

Please indicate which officers elect to receive the SFMS LOADSTAR via email:

Pres. __ Recording Sec __ Corresponding Sec __ Treasurer __ Editor __ Other _____

Please indicate which 3 officers wish to receive the AFMS Newsletter:

Pres. __ Recording Sec __ Corresponding Sec __ Treasurer __ Editor __ AFMS Liaison __

ELECTED OFFICIALS

(List all officers Elected by membership vote & title of office held)

Month Officers Elected _____ Month Officers take office _____

Officers are elected: Annually _____ Other (be specific) _____

President _____ Email _____

Street Address _____ Telephone _____

City _____ State _____ Zip _____

1st Vice President _____ Email _____

Street Address _____ Telephone _____

City _____ State _____ Zip _____

2nd Vice President _____ Email _____

Street Address _____ Telephone _____

City _____ State _____ Zip _____

Corresponding Secretary _____ Email _____

Street Address _____ Telephone _____

City _____ State _____ Zip _____

Recording Secretary _____ Email _____

Street Address _____ Telephone _____

City _____ State _____ Zip _____

Treasurer _____ Email _____

Street Address _____ Telephone _____

City _____ State _____ Zip _____

SFMS APPLICATION FOR 2010 MEMBERSHIP RENEWAL

Do you wish to participate in the optional Liability Insurance program? Yes ___ No ___

Contact Name _____ Email _____

Street Address _____ Telephone _____

City _____ State _____ Zip _____

Person in your Club/Society who is Federation Liaison in your Club/Society

Name _____ Email _____

Street Address _____ Telephone _____

City _____ State _____ Zip _____

Person in your Club/Society to receive renewal form(s) for next year

Name _____ Email _____

Street Address _____ Telephone _____

City _____ State _____ Zip _____

COMMITTEE CHAIRS

Committee _____ Name _____ Email _____

Street Address _____ Telephone _____

City _____ State _____ Zip _____

Committee _____ Name _____ Email _____

Street Address _____ Telephone _____

City _____ State _____ Zip _____

Committee _____ Name _____ Email _____

Street Address _____ Telephone _____

City _____ State _____ Zip _____

Committee _____ Name _____ Email _____

Street Address _____ Telephone _____

City _____ State _____ Zip _____

Please include other officers such as directors, etc. and other pertinent information about your club or society on a separate sheet of paper.

CLUB SPONSORED SHOW(S)

Show Director _____ Email _____

Street Address _____ Telephone _____

City _____ State _____ Zip _____

Show Dates & Times:

Show location & Address _____

Day 1 _____ Day 2 _____ Day 3 _____ Day 4 _____

Show location & Address _____

Day 1 _____ Day 2 _____ Day 3 _____ Day 4 _____

Signature of person submitting this application _____

Office Held _____